

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	7535	4-10-11
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		70017	6-10-11
RESPONSE FORMALITY REVIEW			1/28/12

# INDEX OF CLAIMS

BEST AVAILABLE COPY

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed i ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1		✓	4/10/11
2		✓	4/10/11
3		✓	3/17/11
4		✓	4/10/11
5		✓	3/14/12
6		✓	4/10/11
7		✓	4/10/11
8		✓	4/10/11
9		✓	4/10/11
10		✓	4/10/11
11		✓	4/10/11
12		✓	4/10/11
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30		✓	4/10/11
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46		✓	4/10/11
47		✓	4/10/11
48		✓	4/10/11
49		✓	4/10/11
50		✓	4/10/11

Claim	Final	Original	Date
51		✓	11/25/10
52		✓	3/1/11
53		✓	3/1/11
54		✓	3/1/11
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56		✓	3/1/11
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100		✓	3/1/11

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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